POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	E.H		09-05-01
O.I.P.E. CLASSIFIER		W.Gw	9/14/01
FORMALITY REVIEW	TH	1118	10-03-01
RESPONSE FORMALITY REVIEW	L C	1024	4-1-02

INDEX OF CLAIMS

✔	Rejected	N	Non-elected
=	Allowed	I	Interference
—	(Through numeral)... Canceled	A	Appeal
÷	Restricted	O	Objected

Claim		Date	Claim		Date	Claim		Date
Final	Original		Final	Original		Final	Original	
1	1		51			101		
2	2		52			102		
3	4		53			103		
4	5		54			104		
5	6		55			105		
6	7		56			106		
7	8		57			107		
8	9		58			108		
9	10		59			109		
10	11		60			110		
11	12		61			111		
12	13		62			112		
	14		63			113		
	15		64			114		
	16		65			115		
	17		66			116		
	18		67			117		
	19		68			118		
	20		69			119		
	21		70			120		
	22		71			121		
	23		72			122		
	24		73			123		
	25		74			124		
	26		75			125		
	27		76			126		
	28		77			127		
	29		78			128		
	30		79			129		
	31		80			130		
	32		81			131		
	33		82			132		
	34		83			133		
	35		84			134		
	36		85			135		
	37		86			136		
	38		87			137		
	39		88			138		
	40		89			139		
	41		90			140		
	42		91			141		
	43		92			142		
	44		93			143		
	45		94			144		
	46		95			145		
	47		96			146		
	48		97			147		
	49		98			148		
	50		99			149		
			100			150		

If more than 150 claims or 10 actions
staple additional sheet here

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